IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RESPONSE UNDER RULE 116 EXPEDITED HANDLING PROCEDURES

				EXPEDITED HANDLING PROCEDURES Attachments:	
In re Patent Application of	Atty Dkt.		665-132		
	D.K.	C#	M#	(1) Amendment After Final	
FONTES et al. TC/A.U		1617	1617 Rejection; and		
Serial No. 10/521,239	Examiner:		Louis	(2) copy of registration by EMEA; Kya et al., Neuromuscular Disorders 17 (2007) 248-253; Kya et al, Muscle & Nerve,	
Filed: January 14, 2005	Dat	e: October 17, 2008			
Title: COMPOSITIONS INTENDED FOR THE TREATMENT OF PERIPHERAL NEUROPATHIES, PREPARATION AND USES OF SAME				August 2008, pp 1052-1054; and Passage et al, Nature Medicine, Published online 21 March 2004; doi: 10.1038/nm 1023	
Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				doi. 10.1038/1111 1023	
Sir:				_	
This is a response/amendment/letter in the	RESPONSE/				
				the attachment in the absence of any other	
☐ Correspondence Address Inc	dication Fo	rm Atta	ched.		
Fees are attached as calculated below: Total effective claims after amendment previously paid for 22 (at leas		us highes x \$52.0		\$0.00 (1202)/\$0.00 (2202) \$	
Independent claims after amendment previously paid for 3 (at least 3		us highes x \$220		\$0.00 (1201)/\$0.00 (2201) \$	
If proper multiple dependent claims now a	added for first	time, (ign			
Petition is hereby made to extend the cur paper and attachment(s)	C Two Three For	one Month Month E Month E ur Month	cover the filing Extension \$ Extensions \$4 Extensions \$1 Extensions \$	\$390.00 (1203)/\$195.00 (2203) \$ g date of this 130.00 (1251)/\$65.00 (2251) 90.00 (1252)/\$245.00 (2252) 110.00 (1253/\$555.00 (2253) 1730.00 (1254/\$865.00 (2254) 350.00 (1255/\$1175.00 (2255) \$ 130.00	
Terminal disclaimer enclosed, add			\$	\$140.00 (1814)/ \$70.00 (2814) \$	
☐ Applicant claims "small entity" status.	☐ Statem	ent filed	herewith		
Rule 56 Information Disclosure Statement Filing Fee				\$180.00 (1806) \$ 0.00	
Assignment Recording Fee				\$40.00 (8021) \$ 0.00	
Other:				\$ 0.00	
	TOTAL	FEE PA	ID ELECTRO	ONICALLY BY CREDIT CARD \$ 130.00	
☐ CREDIT CARD PAYMENT I	FORM AT	ГАСНЕ	D.		
The Commissioner is hereby authorized to asserted to be filed, or which should have firm) to our Account No. 14-1140.					
901 North Glebe Road, 11 th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100	NIXON & VANDERHY By Atty: B. J. Sadoff, I				
BJS:pp	S	ignature:		/B. J. Sadoff/	